

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

Mail Stop ISSUE FEE
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7590

09/24/2004

Connolly Bove Lodge & Hutz LLP
1990 M Street, N.W., Suite 800
Washington, DC 20036-3425

12/09/2004 MWOLDGE2 00000004 220185 09879932

01 FC:1501 1370.00 DA
 02 FC:1504 300.00 DA
 03 FC:8001 9.00 DA

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/879,932	06/14/2001	Maki Yamada	20402/0624	4449

TITLE OF INVENTION: METHOD AND APPARATUS FOR PRODUCING ACOUSTIC MODEL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	12/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
AZAD, ABUL K	2654	704-247000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Connolly Bove Lodge & Hutz LLP**
 2
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MATSUSHITA ELECTRIC INDUSTRIAL
CO., LTD.

Osaka, JAPANPlease check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies **three (3)**

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **22-0185** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims **SMALL ENTITY** status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming **SMALL ENTITY** status. See 37 CFR 1.27(e)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
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Authorized Signature

Date **November 7, 2004**Typed or printed name **Morris Liss**Registration No. **24,510**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.**

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**FAX TRANSMISSION****DATE:** December 7, 2004**PTO IDENTIFIER:** Application Number 09/879,932-Conf. #4449
Patent Number**Inventor:** Maki Yamada et al.**MESSAGE TO:** Office of Patent Publication**FAX NUMBER:** (703) 746-4000**FROM:** CONNOLLY BOVE LODGE & HUTZ LLP
Morris Liss**PHONE:** (202) 331-7111**Attorney Dkt. #:** 20402-00624-US**PAGES (Including Cover Sheet):** 4**CONTENTS:** Fee Transmittal
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Certificate of Transmission (1 page)

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Application No. (if known): 09/879,932

Attorney Docket No.: 20402-00624-US

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on December 7, 2004
Date

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FEE TRANSMITTAL

for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,679.00
Complete if Known

Application Number	09/879,932-Conf. #4449
Filing Date	June 14, 2001
First Named Inventor	Maki Yamada
Examiner Name	Not Yet Assigned
Art Unit	N/A
Attorney Docket No.	20402-00624-US

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order
☒ Deposit Account ☐ None

 Deposit Account Number: 22-0185
 Deposit Account Name: Connolly Bove Lodge & Hutz LLP

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☐ Other (please identify):
FEE CALCULATION**1. BASIC FILING FEE**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	790	395	
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	
Subtotal (1) \$			0.00

FEE CALCULATION (continued)**2. EXTRA CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=	
HP = highest number of total claims paid for, if greater than 20			

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	
HP = highest number of independent claims paid for, if greater than 3			

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

Subtotal (2) \$ 0.00**3. OTHER FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid
1-month extension of time	110	55	
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. Fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	
1504; 8001; 1501 Publication fee for early, voluntary, or normal publication: Printed copy of patent w/o color, Utility issue fee			1,679.00

Subtotal (3) \$ 1,679.00**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	24,510	Telephone	(202) 331-7111
Name (Print/Type)	Morris Liss	Date	December 7, 2004		